

COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

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Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. **Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.**

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Name of Traveler: CHRISTOPHER SOGHOLIAN

Employing Office/Committee: SEN. WYDEN

Travel Expenses Paid by (List all sources): CONSUMER TECHNOLOGY ASSOCIATION


Travel Date(s): 1-8-19 - 1-16-19

Description/Title of Attached Forms: EMPLOYEE PRE-TRAVEL AUTHORIZATION

Purpose of Amendment (describe the reason for amending original submission):

COPY OF FORM MISSING FROM ORIGINAL SUBMISSION

2-27-19
(Date)


(Signature of Traveler)

EMPLOYEE PRE-TRAVEL AUTHORIZATION

Date/Time Stamp:

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Pre-Travel Filing Instructions: Complete and submit this form at least 30 days prior to the travel departure date to the Select Committee on Ethics in SH-220. Incomplete and late travel submissions will not be considered or approved. This form must be typed and is available as a fillable PDF on the Committee's website at ethics.senate.gov. Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

Name of Traveler: Christopher Soghoian

Employing Office/Committee: Senator Ron Wyden

Private Sponsor(s) (list all): Consumer Technology Association (CTA)

Travel date(s): 1/8/19 - 1/10/19

Note: If you plan to extend the trip for any reason you must notify the Committee.

Destination(s): Las Vegas, NV

Explain how this trip is specifically connected to the traveler's official or representational duties:

Attending the CTA's annual trade show and conference will enable me to better assist Senator Wyden with his legislative work in the areas of privacy, cybersecurity, and technology, by giving me hands-on exposure to new technologies and the opportunity to hear directly from subject matter experts.

Name of accompanying family member (if any): _____

Relationship to Employee: ☐ Spouse ☐ Child

I certify that the information contained in this form is true, complete and correct to the best of my knowledge:

11/26/2018
(Date)

Christopher Soghoian
(Signature of Employee)

TO BE COMPLETED BY SUPERVISING SENATOR/OFFICER (President of the Senate, Secretary of the Senate, Sergeant at Arms, Secretary for the Majority, Secretary for the Minority, and Chaplain):

I, RON WYDEN hereby authorize CHRISTOPHER SOGHOIAN
(Print Senator's/Officer's Name) (Print Traveler's Name)

an employee under my direct supervision, to accept payment or reimbursement for necessary transportation, lodging, and related expenses for travel to the event described above. I have determined that this travel is in connection with his or her duties as a Senate employee or an officeholder, and will not create the appearance that he or she is using public office for private gain.

I have also determined that the attendance of the employee's spouse or child is appropriate to assist in the representation of the Senate. (signify "yes" by checking box) ☐

11/26/18
(Date)

R. Wyden
(Signature of Supervising Senator/Officer)